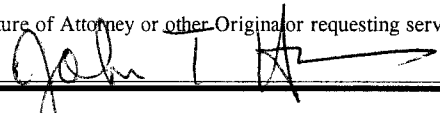
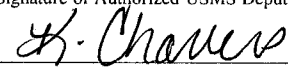



Case 2:07-cv-00136-WHA-CSC Document 18
U.S. Department of Justice
United States Marshals Service

Filed 02/27/2008 Page 1 of 1
PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER 2:06cv136-WHA	
DEFENDANT \$7,860.00 IN UNITED STATES CURRENCY		TYPE OF PROCESS DECREE OF FORFEITURE	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN DEFENDANT CURRENCY - \$7,860.00		
	.ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) c/o UNITED STATES MARSHALS SERVICE		
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form -285	1
John T. Harmon United States Attorney's Office Assistant United States Attorney Post Office Box 197 Montgomery, Alabama 36101-0197		Number of parties to be served in this case	
		Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service) Asset Identification No. 06-DEA-473723			
Signature of Attorney or other Originator requesting service on behalf of: 		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (334) 223-7280
		DATE 01/30/08	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>2</u>	District to Serve No. <u>2</u>
		Signature of Authorized USMS Deputy or Clerk 	Date <u>1/31/08</u>
I hereby certify and return that I <input type="checkbox"/> have personally served, <input checked="" type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.			
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).			
Name and title of individual served (If not shown above).		<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)		Date of Service <u>1/31/08</u>	Time <u>4:50</u> <u>pm</u>
		Signature of U.S. Marshal or Deputy 	
Service Fee <u>45.00</u>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges <u>45.00</u>
		Advance Deposits	Amount Owed to US Marshal or Amount or Refund

REMARKS: TF to 5042 A.F.F.

RETURNED AND FILED

FEB 27 2008

PRIOR EDITIONS MAY
BE USED

FORM USM 285 (Rev. 12/15/80)

CLERK
U.S. DISTRICT COURT
MIDDLE DIST. OF ALA.